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APPLICANTS

Stacy Barrows, Manhattan Beach, CA;

** CONTINUING DATA ****

none *TN*

** FOREIGN APPLICATIONS ****

none *TN*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 06/02/2004

| | | | |
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| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | | |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after | | |
| Verified and Acknowledged | <i>Tam</i> <i>Tom</i> <i>Initials</i> | | |
| Examiner's Signature | Initials | | |
| STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| CA | 1 | 5 | 3 |

ADDRESS

Michael D. Harris
 KLEINBERG & LERNER, LLP
 Suite 1080
 2049 Century Park East
 Los Angeles, CA90067-3112

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TITLE

Foam roller

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| FILING FEE RECEIVED 810 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
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